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Bib Data Sheet

CONFIRMATION NO. 2997

<b>SERIAL NUMBER</b> 09/939,131	<b>FILING DATE</b> 08/24/2001 <b>RULE</b>	<b>CLASS</b> 008	<b>GROUP ART UNIT</b> 1751	<b>ATTORNEY DOCKET NO.</b> Mo-6454/LeA 34,826
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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\***

8 GERMANY 10042498.8 08/30/2000

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 10/01/2001**

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 8	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <u>[Signature]</u> Initials: <u>8</u>				

**ADDRESS**

00157

**TITLE**

Polyaspartic acid concentration determination by fluorometry

<b>FILING FEE RECEIVED</b> 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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